

# Oklahoma Insurance Adjuster's License Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

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# Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

**Remember:** successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

# How to Use This Guide

**This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:**

## **1. Start with a Diagnostic Review**

**Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.**

## **2. Study in Short, Focused Sessions**

**Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.**

## **3. Learn from the Explanations**

**After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.**

## **4. Track Your Progress**

**Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.**

## **5. Simulate the Real Exam**

**Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.**

## **6. Repeat and Review**

**Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.**

**There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!**

## Questions

- 1. What aspect of an insurance policy addresses reimbursement from a responsible third party?**
  - A. Indemnification**
  - B. Subrogation**
  - C. Exclusion**
  - D. Limitation**
- 2. Which of the following is an obligation of the employer under workers' compensation regulations?**
  - A. Providing private insurance**
  - B. Reporting injuries**
  - C. Paying salaries during recovery**
  - D. Offering job reassignment**
- 3. How would you best describe a competitive state when it comes to workers' compensation coverage?**
  - A. Private insurance companies write WC coverage, and the state offers no competition.**
  - B. Only private insurance companies offer workers' compensation coverage.**
  - C. The state has an exclusive right to provide workers' compensation insurance.**
  - D. Private insurance companies write WC coverage, but the state also writes coverage that competes with the coverage offered by private carriers.**
- 4. What powers does the Oklahoma Insurance Commissioner possess during hearings?**
  - A. Take depositions, issue fines, and revoke licenses**
  - B. Take depositions, subpoena witnesses, and administer oaths**
  - C. Issue permits, collect premiums, and mandate coverage**
  - D. Subpoena evidence, collect premiums, and set market rates**
- 5. In order for a liability policy to cover a claim, who must be legally liable?**
  - A. A random person**
  - B. An "insured" under the policy**
  - C. Any bystander**
  - D. The insurance company**

- 6. What considerations are important in determining "replacement cost"?**
- A. Current market prices, actual damage assessment, and policy terms specifying replacement treatment**
  - B. The age of the property and its original purchase price**
  - C. Only the policyholder's request for a claim**
  - D. The average annual increase in property value**
- 7. Which of the following is not true regarding the Oklahoma continuing education program?**
- A. Excess CE hours may not be carried over to the next reporting period.**
  - B. All CE hours are mandatory for license renewal.**
  - C. CE providers must be approved by the state.**
  - D. CE hours must be completed every two years.**
- 8. When evaluating a permanent impairment, what should physicians reference according to the AMA guidelines?**
- A. The patient's past medical history only.**
  - B. The employee's job responsibilities only.**
  - C. A comprehensive list of medical criteria.**
  - D. The patient's family medical history.**
- 9. Which of the following is NOT one of the four elements of a negligent act?**
- A. The defendant was aware of risk prior to the act.**
  - B. The plaintiff suffered damages.**
  - C. The defendant entered into a legal contract with the plaintiff.**
  - D. The defendant breached a duty of care.**
- 10. Which party must be notified about a name or address change within 30 days?**
- A. The employer**
  - B. The insurance company**
  - C. The Oklahoma Insurance Commissioner**
  - D. The injured worker**



## **Answers**

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1. B
2. B
3. D
4. B
5. B
6. A
7. A
8. C
9. C
10. C

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## **Explanations**

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**1. What aspect of an insurance policy addresses reimbursement from a responsible third party?**

- A. Indemnification**
- B. Subrogation**
- C. Exclusion**
- D. Limitation**

The aspect of an insurance policy that addresses reimbursement from a responsible third party is subrogation. This principle allows an insurer to step into the shoes of the insured after it has paid a claim to recover costs from the party that is responsible for the loss. When an insurer pays for damages or losses covered by a policy, it has the right to pursue the other party (the third party) who is liable for those damages to recoup the amount it has paid. Subrogation is a vital process for insurance companies as it helps control costs and can lead to lower premiums for insured individuals, benefiting the entire insurance system. By having the right to subrogate, insurers can maintain financial stability and mitigate losses associated with claims. The other options do not relate to reimbursement from third parties in the same manner. Indemnification refers to compensating the insured for losses without necessarily involving third parties. Exclusions are specific conditions or circumstances that are not covered by the policy. Limitations set boundaries on the extent of coverage or the amount that can be claimed under certain conditions, but none specifically addresses the process of seeking reimbursement from responsible parties.

**2. Which of the following is an obligation of the employer under workers' compensation regulations?**

- A. Providing private insurance**
- B. Reporting injuries**
- C. Paying salaries during recovery**
- D. Offering job reassignment**

The obligation of the employer under workers' compensation regulations includes the requirement to report injuries. This is essential for ensuring that the injured employee receives the appropriate medical treatment and benefits as stipulated under workers' compensation laws. When injuries are reported promptly, it facilitates a smoother claims process, ensuring that employees can access necessary medical care and that employers can comply with state laws. Reporting injuries allows the insurance provider to begin the claims process and assess the situation accurately, thereby protecting both the employer's interests and the rights of the employee. It helps in tracking workplace safety trends and identifying potential hazards that could be addressed to prevent future incidents. While providing private insurance, paying salaries during recovery, and offering job reassignment may also be related to workplace practices and employee support, they are not explicitly required under workers' compensation regulations as the reporting of injuries is. This distinguishes injury reporting as a vital and mandated responsibility for employers in relation to workers' compensation.

**3. How would you best describe a competitive state when it comes to workers' compensation coverage?**

- A. Private insurance companies write WC coverage, and the state offers no competition.**
- B. Only private insurance companies offer workers' compensation coverage.**
- C. The state has an exclusive right to provide workers' compensation insurance.**
- D. Private insurance companies write WC coverage, but the state also writes coverage that competes with the coverage offered by private carriers.**

A competitive state in the context of workers' compensation coverage is best described by the scenario where private insurance companies are allowed to write workers' compensation (WC) coverage and the state also provides its own coverage that competes directly with these private offerings. This environment promotes healthy competition, as employers can choose from various options, balancing cost and benefits. In such a competitive landscape, state involvement can create alternatives for businesses, possibly leading to better pricing and service options due to the variety of offerings. Additionally, this competitive model can help ensure that companies are meeting the necessary coverage requirements while having the flexibility to select policies that best suit their specific needs. The presence of both private and state insurance options helps maintain a more dynamic and responsive workers' compensation market.

**4. What powers does the Oklahoma Insurance Commissioner possess during hearings?**

- A. Take depositions, issue fines, and revoke licenses**
- B. Take depositions, subpoena witnesses, and administer oaths**
- C. Issue permits, collect premiums, and mandate coverage**
- D. Subpoena evidence, collect premiums, and set market rates**

The Oklahoma Insurance Commissioner is endowed with specific powers during hearings that facilitate the regulatory process. The ability to take depositions, subpoena witnesses, and administer oaths is fundamental to conducting a fair and thorough investigation. Taking depositions allows the Commissioner to gather sworn testimonies from individuals, which can provide valuable insights and clarify facts relevant to the case at hand. Subpoenaing witnesses is crucial as it compels individuals to testify or produce documents, thereby ensuring that the Commissioner has access to all necessary information to exercise authority effectively. Administering oaths is a critical practice in legal proceedings, ensuring that testimonies provided are truthful and can be relied upon during the hearing process. These powers collectively empower the Oklahoma Insurance Commissioner to maintain the integrity of insurance regulations, enforce the law, and ensure accountability within the insurance industry. The other options may include activities that are outside the scope of the Commissioner's powers during hearings or are more aligned with different responsibilities within the insurance regulatory framework.

**5. In order for a liability policy to cover a claim, who must be legally liable?**

- A. A random person**
- B. An "insured" under the policy**
- C. Any bystander**
- D. The insurance company**

For a liability policy to cover a claim, it is essential that the party involved in the claim is classified as an "insured" under the policy. This means that the individual or organization must be specifically named or defined within the policy as eligible for coverage. Liability insurance is designed to protect the insured from claims made by third parties for damages or injury for which they are legally responsible. The legal liability falls upon the insured to satisfy the conditions of the policy. If an insured party is found liable for causing bodily injury or property damage to another, the liability policy will provide coverage for the resulting claims, up to the policy limits. This ensures that the insured has the financial backing to handle claims made against them, promoting both personal security and legal protection in the event of accidental incidents. In contrast, the other options involve parties who do not have a direct relationship with the liability insurance policy. A random person or a bystander who is not identified as an insured under the policy has no coverage under it. Moreover, the insurance company is not liable simply by virtue of the situation; they provide the coverage but are not the ones bearing legal liability. Thus, the correct answer reflects the foundational principle of liability insurance, which is that coverage applies when the claims are brought

**6. What considerations are important in determining "replacement cost"?**

- A. Current market prices, actual damage assessment, and policy terms specifying replacement treatment**
- B. The age of the property and its original purchase price**
- C. Only the policyholder's request for a claim**
- D. The average annual increase in property value**

Determining "replacement cost" encompasses several critical considerations to accurately assess the amount needed to replace an asset or property without accounting for depreciation. The correct answer includes current market prices, which reflect the present valuation of materials and labor necessary for the replacement. This aspect ensures that the cost assessment aligns with what it would realistically take to replace the property today. Additionally, an actual damage assessment is vital because it provides a clear understanding of the severity and specifics of the loss, guiding the numerical estimate based on real conditions. Policy terms specifying replacement treatment also play an essential role, as they dictate how replacements should be handled according to the insurance policy itself, including any stipulations regarding materials or construction methods. These factors combined ensure that the replacement cost reflects an accurate, fair, and comprehensive valuation that aligns with current realities, enabling the insured to recover adequately after a loss.

**7. Which of the following is not true regarding the Oklahoma continuing education program?**

- A. Excess CE hours may not be carried over to the next reporting period.**
- B. All CE hours are mandatory for license renewal.**
- C. CE providers must be approved by the state.**
- D. CE hours must be completed every two years.**

The assertion that excess continuing education hours may not be carried over to the next reporting period is accurate. In Oklahoma, the Continuing Education (CE) program is structured such that any CE hours completed beyond the required amount for a given reporting period do not count towards the next cycle. This policy is designed to maintain a standard of education that ensures all licensees are consistently up to date without allowing for the dilution of requirements by carrying over excessive hours. This system emphasizes the importance of ongoing education and new learning within each reporting period, prompting adjusters to engage regularly with the required coursework rather than relying on past excess hours to meet future obligations. In contrast, the other statements establish the necessary framework of the continuing education program in Oklahoma, highlighting the mandatory nature of CE hours for license renewal, the requirement for providers to be state-approved, and the two-year cycle that licensees must adhere to in order to maintain their licensure.

**8. When evaluating a permanent impairment, what should physicians reference according to the AMA guidelines?**

- A. The patient's past medical history only.**
- B. The employee's job responsibilities only.**
- C. A comprehensive list of medical criteria.**
- D. The patient's family medical history.**

When evaluating a permanent impairment, physicians should reference a comprehensive list of medical criteria according to the AMA guidelines. This approach ensures that the assessment is based on standardized metrics that can objectively measure impairment regardless of individual circumstances. The AMA guides provide specific methods for assessing the level of impairment related to various medical conditions, allowing physicians to utilize consistent and scientifically backed criteria in their evaluations. Using a comprehensive list means that physicians can consider a wide range of factors affecting the impairment, including the nature of the injury, its impact on bodily functions, and how it might limit daily activities. This method enhances the reliability of the impairment ratings since they should not rely solely on subjective accounts or narrower views of the patient's situation. Emphasizing comprehensive criteria aligns the evaluation with accepted medical practices and allows for the identification of the full extent of a patient's impairment.

**9. Which of the following is NOT one of the four elements of a negligent act?**

- A. The defendant was aware of risk prior to the act.**
- B. The plaintiff suffered damages.**
- C. The defendant entered into a legal contract with the plaintiff.**
- D. The defendant breached a duty of care.**

The correct answer is that the defendant entered into a legal contract with the plaintiff is not one of the four elements of a negligent act. In a negligence claim, the focus is primarily on the actions or conduct of the defendant, not on whether a legal contract exists between the parties. The four elements generally considered essential for establishing negligence are duty, breach, causation, and damages. Duty refers to the legal obligation the defendant has to act with a certain standard of care towards others. Breach occurs when the defendant fails to meet this standard. Causation links the breach of duty to the harm suffered by the plaintiff, and damages signify that the plaintiff has incurred a loss. Hence, the presence of a legal contract does not affect these elements but addresses a different area of law, such as contract law.

**10. Which party must be notified about a name or address change within 30 days?**

- A. The employer**
- B. The insurance company**
- C. The Oklahoma Insurance Commissioner**
- D. The injured worker**

The requirement to notify the Oklahoma Insurance Commissioner about a name or address change within 30 days is rooted in the regulations that govern the licensing and oversight of insurance adjusters. Keeping the Commissioner informed ensures that all records are current and maintains the integrity of the licensing system. This is critical because the Commissioner oversees compliance and can take action if adjustments are not properly reported, which supports accountability within the industry. In contrast, while it may be necessary for an adjuster to inform their employer, the insurance company, or the injured worker about changes, these parties do not have the same regulatory responsibility as the Oklahoma Insurance Commissioner. Therefore, the obligation to notify the Commissioner is specifically highlighted in the regulations to ensure compliance with state laws regarding insurance practices.



## Next Steps

**Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.**

**As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.**

**If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at [hello@examzify.com](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://okinsuranceadjuster.examzify.com>**

**We wish you the very best on your exam journey. You've got this!**